

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (1-21)**  
**STATE: MS**  
**APPLICATION YEAR: 2006**

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<b>APPLICATION FOR FEDERAL ASSISTANCE</b>		2. DATE SUBMITTED <b>7/15/2005</b>	APPLICANT IDENTIFIER
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER
Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER
5. APPLICANT INFORMATION			
Legal Name: <b>Mississippi State Department of Health</b>		Organizational Unit: <b>Health Services</b>	
Address (give city, county, state and zip code) <b>570 E. Woodrow Wilson P.O. Box 1700 Jackson, MS 39215 County: Hinds</b>		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: <b>Daniel R. Bender</b> Tel Number: <b>(601) 576-7472</b>	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">6</div><div style="border: 1px solid black; padding: 2px 5px;">4</div><div style="border: 1px solid black; padding: 2px 5px;">6</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">7</div><div style="border: 1px solid black; padding: 2px 5px;">7</div><div style="border: 1px solid black; padding: 2px 5px;">5</div></div>		7. TYPE OF APPLICANT: (Enter appropriate letter in box) <b>A</b> A. State                      H. Independent School District B. County                    I. State Controlled Institution of Higher Learning C. Municipality              J. Private University D. Township                K. Indian Tribe E. Interstate                L. Individual F. Intermunicipality        M. Profit Organization G. Special District        N. Other (Specify)	
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award   B. Decrease Award   C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: <b>Health Resources and Services Administration, Maternal and Child Health Bureau</b>	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">3</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">4</div></div> TITLE: <b>Maternal and Child Health Services Block Grant</b>		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: <b>Statewide Plan for Maternal and Child Health</b>	
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): <b>Statewide</b>			
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date: <b>10/01/2005</b>	Ending Date: <b>09/30/2006</b>	a. Applicant <b>I, II, III, IV</b>	b. Project <b>Same as 14a</b>
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$ <u>10,537,408.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:  b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant	\$ <u>0.00</u>		
c. State	\$ <u>7,949,273.00</u>		
d. Local	\$ <u>0.00</u>		
e. Other	\$ <u>0.00</u>		
f. Program Income	\$ <u>0.00</u>		
g. TOTAL	\$ <u>18,486,681.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Typed Name of Authorized Representative <b>Brian W. Amy, MD, MHA, MPH</b>		b. Title <b>State Health Officer</b>	c. Telephone Number <b>(601) 576-7634</b>
d. Signature of Authorized Representative		e. Date Signed	

**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2006**

[Secs. 504 (d) and 505(a)(3)(4)]

**STATE: MS**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])  
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 10,537,408

A.Preventive and primary care for children:

\$ 3,161,222 ( 30%)

B.Children with special health care needs:

\$ 3,161,222 ( 30%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 1,053,740 ( 10%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

**2. UNOBLIGATED BALANCE** (Item 15b of SF 424)

\$ 0

**3. STATE MCH FUNDS** (Item 15c of the SF 424)

\$ 7,949,273

**4. LOCAL MCH FUNDS** (Item 15d of SF 424)

\$ 0

**5. OTHER FUNDS** (Item 15e of SF 424)

\$ 0

**6. PROGRAM INCOME** (Item 15f of SF 424)

\$ 0

**7. TOTAL STATE MATCH** (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 6,576,655

\$ 7,949,273

**8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)**

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 18,486,681

**9. OTHER FEDERAL FUNDS**

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 0

d. Abstinence Education: \$ 828,953

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 63,962,947

h. AIDS: \$ 0

i. CDC: \$ 0

j. Education: \$ 4,509,173

k. Other: \$ 0

Title X \$ 6,368,205

\$ 0

**10. OTHER FEDERAL FUNDS** (SUBTOTAL of all Funds under item 9)

\$ 75,769,278

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 94,255,959

**FORM NOTES FOR FORM 2**

None

**FIELD LEVEL NOTES**

None

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: MS**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> (Line1, Form 2)	\$ 10,928,315	\$ 10,918,064	\$ 10,537,408	\$ 0	\$ 10,537,408	\$ 0
<b>2. Unobligated Balance</b> (Line2, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> (Line3, Form 2)	\$ 8,244,167	\$ 12,034,691	\$ 7,949,273	\$ 0	\$ 7,949,273	\$ 0
<b>4. Local MCH Funds</b> (Line4, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> (Line5, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> (Line6, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> (Line8, Form 2)	\$ 19,172,482	\$ 22,952,755	\$ 18,486,681	\$ 0	\$ 18,486,681	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> (Line10, Form 2)	\$ 75,768,416	\$ 71,706,703	\$ 77,540,563	\$ 0	\$ 75,769,278	\$ 0
<b>9. Total</b> (Line11, Form 2)	\$ 94,940,898	\$ 94,659,458	\$ 96,027,244	\$ 0	\$ 94,255,959	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: MS**

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 10,928,315	\$ 10,638,887	\$ 10,928,315	\$ 11,370,646	\$ 10,928,315	\$ 11,088,275
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 8,244,167	\$ 8,551,184	\$ 8,244,167	\$ 10,958,403	\$ 8,244,167	\$ 12,257,195
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 19,172,482	\$ 19,190,071	\$ 19,172,482	\$ 22,329,049	\$ 19,172,482	\$ 23,345,470
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 68,159,941	\$ 68,159,941	\$ 70,263,882	\$ 70,263,882	\$ 72,821,650	\$ 72,821,650
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 87,332,423	\$ 87,350,012	\$ 89,436,364	\$ 92,592,931	\$ 91,994,132	\$ 96,167,120
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Budgeted amount for state match is only an estimate, calculated as a percentage of the federal MCH allocation; consequently, actual expenditures tend to differ from the budgeted amounts.
2. **Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted amount was simply an estimate of future expenditures based upon match requirement for grant. Actual expenditures proved to be more.

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: MS**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 7,093,477	\$ 6,669,877	\$ 5,546,004	\$ 0	\$ 5,546,004	\$ 0
b. Infants < 1 year old	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
c. Children 1 to 22 years old	\$ 5,234,428	\$ 7,268,973	\$ 5,546,004	\$ 0	\$ 5,546,004	\$ 0
d. Children with Special Healthcare Needs	\$ 5,751,746	\$ 7,944,395	\$ 5,546,004	\$ 0	\$ 5,546,004	\$ 0
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 1,092,831	\$ 1,069,510	\$ 1,848,669	\$ 0	\$ 1,848,669	\$ 0
g. SUBTOTAL	\$ 19,172,482	\$ 22,952,755	\$ 18,486,681	\$ 0	\$ 18,486,681	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 96,324		\$ 100,000		\$ 100,000	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 1,062,752		\$ 846,680		\$ 828,953	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 61,603,035		\$ 63,017,321		\$ 63,962,947	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 3,432,422		\$ 2,820,059		\$ 0	
j. Education	\$ 4,213,822		\$ 4,387,834		\$ 4,509,173	
k. Other						
Title X	\$ 0		\$ 6,368,669		\$ 6,368,205	
Title X Family Plng	\$ 5,360,061		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 75,768,416		\$ 77,540,563		\$ 75,769,278	



**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: MS**

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 7,719,734	\$ 7,771,247	\$ 7,719,734	\$ 7,021,515	\$ 7,093,477	\$ 7,150,130
b. Infants < 1 year old	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
c. Children 1 to 22 years old	\$ 4,608,171	\$ 3,600,440	\$ 4,608,171	\$ 6,306,421	\$ 5,234,428	\$ 7,733,492
d. Children with Special Healthcare Needs	\$ 5,751,746	\$ 6,868,226	\$ 5,751,746	\$ 7,942,541	\$ 5,751,746	\$ 7,580,611
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 1,092,831	\$ 950,158	\$ 1,092,831	\$ 1,058,573	\$ 1,092,831	\$ 881,237
g. SUBTOTAL	\$ 19,172,482	\$ 19,190,071	\$ 19,172,482	\$ 22,329,050	\$ 19,172,482	\$ 23,345,470
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 242,229		\$ 0		\$ 0	
b. SSDI	\$ 95,000		\$ 160,887		\$ 184,647	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 1,062,752		\$ 1,062,752		\$ 1,062,752	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 56,783,751		\$ 58,029,534		\$ 59,525,457	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 1,891,349		\$ 2,687,943		\$ 2,420,994	
j. Education	\$ 3,688,050		\$ 3,876,753		\$ 4,213,822	
k. Other						
Title X Family Planning	\$ 4,396,810		\$ 4,446,013		\$ 5,413,978	
<b>III. SUBTOTAL</b>	\$ 68,159,941		\$ 70,263,882		\$ 72,821,650	

## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Budgeted amounts are only an estimate of what will be spent. Actual expenditures will tend to differ.
2. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted amount was an estimate of future expenditures calculated as 30% of the total program budget.
3. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Budgeted amounts are only an estimate. Actual expenditures will tend to be different.
4. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted amount was an estimate of future expenditures calculated as 30% of total program budget.
5. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Budgeted amounts are only an estimate. Actual expenditures will tend to be different.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: MS**

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 10,359,746	\$ 12,394,488	\$ 9,982,808	\$ 0	\$ 9,982,808	\$ 0
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 984,226	\$ 1,147,638	\$ 924,334	\$ 0	\$ 924,334	\$ 0
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,485,905	\$ 1,836,220	\$ 1,478,934	\$ 0	\$ 1,478,934	\$ 0
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 6,342,605	\$ 7,574,409	\$ 6,100,605	\$ 0	\$ 6,100,605	\$ 0
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 19,172,482	\$ 22,952,755	\$ 18,486,681	\$ 0	\$ 18,486,681	\$ 0

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: MS**

TYPE OF SERVICE	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 10,359,746	\$ 10,432,698	\$ 10,359,746	\$ 12,066,619	\$ 10,359,746	\$ 12,606,554
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 984,226	\$ 814,145	\$ 984,226	\$ 1,145,480	\$ 984,226	\$ 1,167,273
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,485,905	\$ 1,632,147	\$ 1,485,905	\$ 1,730,501	\$ 1,485,905	\$ 1,867,638
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 6,342,605	\$ 6,311,081	\$ 6,342,605	\$ 7,386,449	\$ 6,342,605	\$ 7,704,005
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 19,172,482	\$ 19,190,071	\$ 19,172,482	\$ 22,329,049	\$ 19,172,482	\$ 23,345,470

## FORM NOTES FOR FORM 5

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Budgeted amounts are only estimates. Actual expenditures will tend to be different.
2. **Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted amount was an estimate. Actual expenditures proved to be more.
3. **Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Budgeted amounts are only estimates. Actual expenditures will tend to be different.
4. **Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted amount was an estimate. Actual expenditures proved to be more.
5. **Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Budgeted amounts are only estimates. Actual expenditures will tend to be different.
6. **Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted amount was an estimate. Actual expenditures proved to be more.
7. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Budgeted amounts are only estimates. Actual expenditures will tend to be different.
8. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted amount was an estimate. Actual expenditures proved to be more.

**FORM 6**

**NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED**

*Sect. 506(a)(2)(B)(iii)*

**STATE: MS**

**Total Births by Occurrence:** 41,488

**Reporting Year: 2004**

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	41,219	99.4	6	2	2	100
Congenital Hypothyroidism	41,219	99.4	37	30	30	100
Galactosemia	41,219	99.4	16	8	8	100
Sickle Cell Disease	41,219	99.4	76	70	70	100

**Other Screening (Specify)**

Biotinidase Deficiency	41,219	99.4	8	3	1	33.3
Congenital Adrenal Hyperplasia (CAH)	41,219	99.4	1	0	0	

**Screening Programs for Older Children & Women (Specify Tests by name)**

Cystic Fibrosis	41,219		12	12	12	100
MCAD	41,219		5	2	2	100
Other (screening began 6/1/03)	41,219		42	3	3	100

(1) Use occurrent births as denominator.

(2) Report only those from resident births.

(3) Use number of confirmed cases as denominator.

## FORM NOTES FOR FORM 6

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** BirthOccurence  
**Row Name:** Total Births By Occurence  
**Column Name:** Total Births By Occurence  
**Year:** 2006  
**Field Note:**  
provisional data provided 1/20/05
2. **Section Number:** Other Screening Types  
**Field Name:** Other  
**Row Name:** All Rows  
**Column Name:** All Columns  
**Year:** 2006  
**Field Note:**  
5 cases of biotinidase deficiency were only partial deficiencies and did not require treatment.

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

[Sec. 506(a)(2)(A)(i-ii)]

**STATE: MS**

Reporting Year: 2003

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	26,158	86.8	0.1	0.0	0.0	13.1
Infants < 1 year old	42,321	86.0	0.0	0.0	14.0	0.0
Children 1 to 22 years old	41,737	89.2	0.1	0.0	0.0	10.7
Children with Special Healthcare Needs	2,978	67.0	7.0	18.0	8.0	0.0
Others	114,029	25.2	0.3	0.0	0.0	74.5
<b>TOTAL</b>	<b>227,223</b>					



<b>FORM NOTES FOR FORM 7</b>
None
<b>FIELD LEVEL NOTES</b>
None

**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: MS**

Reporting Year: 2003

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	42,739	23,240	18,761	291	391	52	0	4
Title V Served	26,158	10,191	14,971	21	93	0	0	882
Eligible for Title XIX	25,214	9,357	14,377	200	139	7	0	1,134
<b>INFANTS</b>								
Total Infants in State	42,321	23,118	18,470	287	390	52	0	4
Title V Served	42,321	23,118	18,470	287	390	52	0	4
Eligible for Title XIX	32,573	12,771	19,345	238	186	33	0	0

**II. UNDUPLICATED COUNT BY ETHNICITY**

				<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	41,786	919	34	630	0	16	56	171
Title V Served	25,644	514	0	0	0	0	0	514
Eligible for Title XIX	24,524	351	0	0	0	0	0	351
<b>INFANTS</b>								
Total Infants in State	41,383	909	29	622	2	16	55	214
Title V Served	41,383	909	29	622	2	16	55	214
Eligible for Title XIX	32,573	753	0	0	0	0	0	753

**FORM NOTES FOR FORM 8**

None

**FIELD LEVEL NOTES**

1. **Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTotal\_TotalHispanic

**Row Name:** Total Deliveries in State

**Column Name:** Total Hispanic or Latino

**Year:** 2006

**Field Note:**

The number of deliveries reported for Hispanic is correct. The total reported is 919, and the total of sub-categories B1-B5 equals 919.

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: MS**

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 721-7222	(800) 721-7222	(800) 721-7222	(800) 721-7222	(800) 721-7222
2. State MCH Toll-Free "Hotline" Name	"Take Care"	"Take Care"	"Take Care"	"Take Care"	"Take Care"
3. Name of Contact Person for State MCH "Hotline"	Louisa Denson	Louisa Denson	Louisa Denson	Hazel Gaines	Hazel Gaines
4. Contact Person's Telephone Number	(601) 576-7950	(601) 576-7950	(601) 576-7950	(601) 354-7471	(601) 354-7471
5. Number of calls received on the State MCH "Hotline" this reporting period	0		493	493	1,100

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: MS**

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

None

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2006**  
*[SEC. 506(A)(1)]*  
**STATE: MS**

**1. State MCH Administration:**  
*(max 2500 characters)*

The Mississippi State Department of Health (MSDH) is the state agency responsible for administering the Title V Program in Mississippi. MCH Block Grant funds are allocated in the MSDH central office to the Office of Women's Health, and the Office of Child/Adolescent Health. The Children's Medical Program, which is the program of services for Children With Special Health Care Needs, is located organizationally within Health Services (HS), which is responsible for all maternal and child health functions. These two HS Offices provide services for the three major populations targeted by the MCH Block Grant: pregnant women, infants, children and adolescents, and children with special health care needs. Health Services is also responsible for administering the statewide Family Planning program and the Women, Infants and Children Supplemental Food Program (WIC).

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 10,537,408
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 7,949,273
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 0
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 18,486,681</b>

**9. Most significant providers receiving MCH funds:**

The University of Mississippi Medical Center
Jackson Medical Mall

**10. Individuals served by the Title V Program (Col. A, Form 7)**

a. Pregnant Women	26,158
b. Infants < 1 year old	42,321
c. Children 1 to 22 years old	41,737
d. CSHCN	2,978
e. Others	114,029

**11. Statewide Initiatives and Partnerships:**

**a. Direct Medical Care and Enabling Services:**  
*(max 2500 characters)*

The MSDH MCH programs are often the first point of entry into the health care system for many women and children. MSDH maternity services are carried out in areas where there are gaps in providers, resulting in approximately 28% of the women who gave birth in Mississippi receiving services in the health department. The CSHCN provides regional clinic services throughout the state. Since the demise of HealthMACS, the Mississippi Medicaid Managed Care Program, EPSDT screenings statewide are being conducted by the MSDH and the percent of children being screened is rising. MSDH also serves many Mississippi children and adolescents through the provision of 315 school nurses who provide an array of services such as tobacco prevention activities and EPSDT screenings. The MSDH partners with the University of Mississippi Medical Center School of Dentistry to provide sealants to children in the Mississippi Delta area. Enabling services consist of case management services of pregnant women and infants through the Pregnancy High Risk Management Program (PHRM), for special needs children through the Children's Medical Program (CMP) and Genetics, and for infants and toddlers with special developmental needs and their families through the First Steps Early Intervention Program. Genetics supports approximately 7 genetics satellite clinics and 5 sickle cell satellite clinics strategically located in the state to make services more accessible for patients and families. The special supplemental Food Program for Women, Infants and Children (WIC) complements all MCH programs by serving as a catalyst to bring mothers and their children into the integrated health care system. WIC services are provided by MSDH in all 82 counties. In addition, translator services are available statewide and the Mississippi Medicaid program provides statewide transportation services.

**b. Population-Based Services:**  
*(max 2500 characters)*

Mississippi continues to expand in population-based services. MCH supported staff in county health departments who provide approximately 80% of the immunizations in Mississippi. Mississippi was one of two southern states to earn national recognition for coverage in basic immunizations. The Division of Genetics Services completed Mississippi's first annual Birth Defects Report consisting of confirmed birth defects for the year 2000. Genetics Services also expanded from 5 to 40 disorders, providing babies born in Mississippi the most extensive genetic screening of any state program. Newborn hearing screening is conducted among infants born in Mississippi, and infants with confirmed hearing losses receive follow-up services and are referred to First Steps Early Intervention Program. Lead screening is occurring with a primary focus of serving children on Medicaid. Sudden Infant Death Syndrome (SIDS) counseling is carried out statewide by trained staff such as social workers and nurses.

**c. Infrastructure Building Services:**  
*(max 2500 characters)*

Mississippi is growing in terms of infrastructure building. A cooperative agreement between the MSDH and the Mississippi Primary Health Care Association (MPHCA) provides a mechanism for joint perinatal planning and provider education between the state MCH Program and the 21 Community Health Centers in the State. Perinatal providers are placed in communities of greatest need through a joint decision-making process of the MPHCA and the MSDH's Office of Primary Care Development. The need for systematic planning for oral health has resulted in the hiring of a full-time Public Health Dentist who is working with the statewide Oral Health Advisory Committee. This committee is developing strategies to improve oral health care for all Mississippi children. Other infrastructure building activities include assigning the MSDH Deputy Director to monitor organizational quality and the development of standards for public health practice. The MSDH Office of Science and Evaluation will promote agency-wide data driven policy and programs and offer collaborative opportunities for scientific work with the MCH Data Unit. The MSDH is strengthening data systems by upgrading the vital records operating system, linking the new birth/death files with program files, adding systems such as the Pregnancy Risk Assessment Monitoring System (PRAMS), enhancing the WIC data

system, and strengthening data systems in all MCH programs. The planning process continues to improve through mechanisms such as using Perinatal Periods of Risk to review contributors to infant death.

12. The primary Title V Program contact person:

Name	Daniel R. Bender
Title	Director of Health Services
Address	Mississippi State Department of Health 570 E. Woodro
City	Jackson
State	MS
Zip	39215-1700
Phone	(601)576-7472
Fax	(601) 576-7825
Email	dbender@msdh.state.ms.us
Web	www.msdh.state.ms.us

13. The children with special health care needs (CSHCN) contact person:

Name	Lawrence Clark
Title	Director of the Children's Medical Program
Address	Children's Medical Program, P. O Box 1700
City	Jackson
State	MS
Zip	39215-1700
Phone	(601) 987-3965
Fax	(601) 987-5560
Email	lawrence.clark@msdh.state.ms.us
Web	www.msdh.state.ms.us

**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None



**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: MS**

**PERFORMANCE MEASURE # 01**

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective				99.8	99.6
Annual Indicator	100.0	99.4	100.0	99.9	99.4
Numerator	44,075	42,039	41,511	41,295	41,219
Denominator	44,075	42,277	41,511	41,316	41,488
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	99.7	99.8	99.9	99.9	99.9
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective				44.5	47.5
Annual Indicator			41.5	41.5	41.5
Numerator			147	147	147
Denominator			354	354	354
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	50.5	53.5	56.5	56.7	56.7
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective				46.2	48.2
Annual Indicator			44.2	44.2	44.2
Numerator			312	312	312
Denominator			706	706	706
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	50.2	52.2	54.2	54.2	54.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective				54.7	57.7
Annual Indicator			51.7	51.7	51.7
Numerator			370	370	370
Denominator			715	715	715
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	60.7	63.7	66.7	66.8	66.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective				70.9	72.9
Annual Indicator			68.8	68.8	68.8
Numerator			245	245	245
Denominator			356	356	356
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	74.9	76.9	78.9	78.9	78.9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective				9.8	13.5
Annual Indicator			10.6	10.6	10.6
Numerator			10	10	10
Denominator			94	94	94
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	13.8	17.8	21.8	21.8	21.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	84.5	86	87	88	89
Annual Indicator	85.5	85.5	89.9	87.1	87.8
Numerator			803	783	798
Denominator			893	899	909
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	90	90.1	90.2	90.2	90.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	44	37	37.2	38.2	36.7
Annual Indicator	44.3	38.4	37.7	35.4	35.9
Numerator	2,929	2,542	2,385	2,217	2,251
Denominator	66,165	66,165	63,321	62,706	62,706
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	35.3	33.9	32.6	31.3	29.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	17	17	17	17	25
Annual Indicator	17	17	17	17	17
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	30	30	30	30	30
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	8	9.1	8.6	8.4	8.2
Annual Indicator	8.9	8.5	8.9	9.4	8.4
Numerator	53	51	56	56	50
Denominator	598,809	598,809	631,139	595,238	595,238
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	8.2	8	7.8	7.6	7.5
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 11**

Percentage of mothers who breastfeed their infants at hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	48	50	53	55	57
Annual Indicator	48.8	50.4	52.4	45.2	47.4
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	59	61	63	65	65
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	98.5	98.5	98.5	99	99.3
Annual Indicator	94.4	96.0	96.1	96.4	96.7
Numerator	41,611	40,599	39,899	40,778	40,921
Denominator	44,075	42,277	41,511	42,321	42,321
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	99.5	99.6	99.7	99.7	99.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	17	14	15	11.5	14.5
Annual Indicator	14.1	15	15	12	10.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	10.5	10.4	10.3	10.2	10.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 14**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	72	72.5	73	73.5	75
Annual Indicator	72.1	86.5	60.7	92.6	96.7
Numerator	241,230	312,826	246,960	363,503	382,511
Denominator	334,689	361,461	406,847	392,720	395,621
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	96.8	96.8	97	97.2	97.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 15**

The percent of very low birth weight infants among all live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	2	2.1	2.2	2.2	2.3
Annual Indicator	2.2	2.1	2.2	2.3	2.3
Numerator	971	882	931	963	963
Denominator	44,075	42,277	41,511	42,321	42,321
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	2.2	2.2	2.1	2.1	2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	8.9	7.6	7.6	7.6	9.2
Annual Indicator	10.7	7.7	10.9	6.0	8.1
Numerator	25	18	24	13	18
Denominator	233,188	233,188	219,992	216,778	222,222
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	7.9	7.7	7.5	7.3	7.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.



**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	34.3	34.3	33.2	33	33
Annual Indicator	31.0	33.7	33.2	34.9	33.5
Numerator	301	297	309	336	323
Denominator	971	882	931	963	963
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	34	34.2	34.5	34.8	35
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	81.7	82.7	83.2	84.1	85.1
Annual Indicator	80.8	82.2	83.1	84.3	85.1
Numerator	35,634	34,760	34,501	35,663	36,015
Denominator	44,075	42,277	41,511	42,321	42,321
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	86	87	87.9	88.9	89.9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 1**

Percent of Children on Medicaid who Receive EPSDT Screening.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	46%	46	46.5	17	19
Annual Indicator	31.7	13.6	11.9	14.7	15.4
Numerator	106,000	32,223	32,191	38,273	40,381
Denominator	334,689	236,562	269,555	259,836	261,831
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	21	23	25	25.5	26
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 2**

Current Percent of Cigarette Smoking Among Ninth Through Twelfth Graders.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	29%	29%	29	22	21
Annual Indicator	32.5	23.6	23.6	25.0	25.0
Numerator	42,515	28,278	28,278	30,491	30,491
Denominator	130,815	119,775	119,775	122,038	122,038
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	20	19	18	18	17.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 3**

Smoking Among Pregnant Adolescents

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	12	11.5	11.4	11.3	11
Annual Indicator	12.3	12.3	12.5	12.3	12.5
Numerator	1,014	929	897	830	846
Denominator	8,266	7,536	7,152	6,769	6,769
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	12.6	12.8	12.9	13.1	13.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 4**

Percent of Children With Genetic Disorders who Receive Case Management Services.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	90	90	95	96	97
Annual Indicator	85.8	94.8	93.7	98.2	99.5
Numerator	2,847	4,010	2,749	3,060	2,977
Denominator	3,320	4,228	2,935	3,117	2,992
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	98	98.5	98.5	98.5	98.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 5**

Infants Screened and Referred for Hearing Impairment Greater Than or Equal to 35 dB nHL Will Receive Appropriate Follow-up and Intervention Upon Hospital Discharge.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	80	80	75	80	85
Annual Indicator	81.3	64.3	79.4	96.4	98.4
Numerator	39	257	316	40,778	40,811
Denominator	48	400	398	42,321	41,488
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	90	95	98	98	98.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 6**

Prevalence of Infants Born with Neural Tube Defects.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	4.6	4.7	3	3	4.6
Annual Indicator	5.2	4.7	3.1	2.1	3.9
Numerator	23	20	13	9	16
Denominator	44,075	42,277	41,511	42,321	41,488
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	3.7	3.7	3.7	3.7	3.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 7**

The Rate of Repeat Birth (per 1000) for Adolescents Less Than 18 Years Old.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	14.5	13.9	13.6	13.1	13.2
Annual Indicator	150.7	140.6	140.8	138.8	129.1
Numerator	477	385	363	329	306
Denominator	3,165	2,738	2,578	2,371	2,371
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	12.5	12	11.6	11.2	10.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 8**

The Degree to Which the MCH Program is Developing Data Infrastructure.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective			16	16.4	16.8
Annual Indicator		14	16	12	15
Numerator		14	16	12	15
Denominator	16	16	16	16	16
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	17.2	17.3	17.5	17.6	17.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

## FORM NOTES FOR FORM 11

None

### FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1  
**Field Name:** PM01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Denominator is indicative of the genetics data base and the number of infants born in hospitals and screened. Therefore, the number of live births may differ from vital statistics information used in other areas of this report.
2. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
3. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.  
  
The SLAITS survey definition of children with special health care needs is much more inclusive than the eligibility criteria for the state's CSHCN program. Efforts are made to ensure that all CMP enrollees receive coordinated, ongoing, and comprehensive care within a medical home. Access to specialty services is facilitated as indicated.
4. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
5. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
6. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
7. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
8. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS and differs from the data or percent collected and reported by the state in the narrative for this measure.
9. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
10. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
11. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**

Because only one of the States (Maine) met the NCHS standards for reliability for PM 6, the 2002 indicator is the national average except for Maine which has its State value noted.

12. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
13. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
14. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
These data are generated from a 2 year old survey that does not provide a numerator or denominator.  
Percentages, numerators and denominators are derived from a yearly survey conducted by the MDH Immunization department. For example, for the year 2002 MDH surveyed 949 children born in 1999. Out of that we were able to locate and review 893 immunization records. 89.9% of those children were complete at 2 yrs of age.
15. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The current Immunization Survey used captures data of children immunized up to 27 months old.  
Percentages, numerators and denominators are derived from a yearly survey conducted by the MDH Immunization department. MDH surveyed 955 children born in 2000. Out of that we were able to locate and review 899 immunization records. 87.1% of those children were complete at 2 yrs of age. By sampling the immunization records of 19-35 month olds, the MDH is able to generate immunization rates consistently.
16. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Percentages, numerators and denominators are derived from a yearly survey conducted by the MDH Immunization department. MDH surveyed 970 children born in 2001. Out of that we were able to locate and review 909 immunization records. 87.8% of those children were complete at 2 yrs of age. By sampling the immunization records of 19-35 month olds, the MDH is able to generate immunization rates consistently.
17. **Section Number:** Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Annual performance objectives were based on previous five year trend, and, thus, may not appear linear.
18. **Section Number:** Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
A statewide assessment of the presence of sealants among school children was conducted in 1999. This assessment has not been updated.  
  
The annual performance objectives are based on data collected from the Jackson Metropolitan Area and not the entire state.
19. **Section Number:** Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for this measure were provided from the latest (1999) Clinical Oral Health Survey.
20. **Section Number:** Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for this measure were provided from the latest (1999) Clinical Oral Health Survey.  
No numerators and denominators are given due to that information not being released from the agency that originally conducted the oral health survey. This information will be provided in the future.
21. **Section Number:** Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Annual performance objectives were based on previous five year trend, and, thus, may not appear linear.
22. **Section Number:** Performance Measure #11  
**Field Name:** PM11

**Row Name:**  
**Column Name:**  
**Year:** 2003

**Field Note:**

These data are provided by the most recent "Ross Mother's Survey" periodically sent to a nationally representative sample of new mothers.

**23. Section Number:** Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

This measure was estimated based on growth in prior years of reporting. Generally, these data are provided by the most recent "Ross Mother's Survey" periodically sent to a nationally representative sample of new mothers.

Information gathered from the Ross Mother's Survey is given in percentages and numerators and denominators are not available.

**24. Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

CY 2003 data for this measure were provided from a 2003 report on health status of children in Mississippi published by the Childrens Defense Fund.

**25. Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

CY 2003 data for this measure were provided from a 2003 report on health status of children in Mississippi published by the Childrens Defense Fund.

**26. Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Currently, data used to determine the number of children in Mississippi without health insurance are extracted from reports posted by the Children's Defense Fund. Numerators and denominators are unavailable at this point in time.

**27. Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

**28. Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data were estimated for this measure because actual 2004 data are unavailable.

**29. Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

**30. Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Provisional data based on information from the previous year.

**31. Section Number:** Performance Measure #17

**Field Name:** PM17

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

Mississippi uses the RNDMU classification of hospitals. The highest level, A, (equivalent to level III) is a teaching hospital with full-time neonatologist, NICU, and both pediatric and obstetrical residency training programs. Level B hospitals cannot be included in the level A category but have a full-time neonatologist, NICU, and =>2 obstetricians.

An additional 34% of very low birth weight infants are born at these level B hospitals.

**32. Section Number:** Performance Measure #17

**Field Name:** PM17

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

.

**33. Section Number:** State Performance Measure #1

**Field Name:** SM1

**Row Name:**



**Column Name:****Year:** 2002**Field Note:**

The percent of children who received EPSDT screening reported for CY 2001 does not include children under age six. The percent only reflects the number screened age 6-20. This was an effort to determine the number of school age children who are actually screened.

Definition of measure changed in 2001 annual report. Numerator and denominator only included children ages 6-20.

**34. Section Number:** State Performance Measure #1**Field Name:** SM1**Row Name:****Column Name:****Year:** 2003**Field Note:**

These data are provided by the Mississippi Division of Medicaid and are calculated based on the percent of eligibles age 1 to 20 years of age receiving any service. The MDH is making a concerted effort to increase EPSDT screening at local county health departments.

**35. Section Number:** State Performance Measure #1**Field Name:** SM1**Row Name:****Column Name:****Year:** 2004**Field Note:**

These data are estimated based on data from previous reports of the percent of eligibles age 1 to 20 years of age receiving any service.

**36. Section Number:** State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2002**Field Note:**

Drop from 2000-2001 could be associated with programs stemming from the master settlement agreement with tobacco companies.

**37. Section Number:** State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2003**Field Note:**

These data were collected and provided by the agency's YRBS Data Survey, which is conducted bi-annually.

**38. Section Number:** State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2003**Field Note:**

The difference in the percent of children with genetic disorders who received case management services between 2001 and 2002, can be attributed to staff changes in the field coupled with the adding of additional screenings mandated by the Mississippi Legislature.

**39. Section Number:** State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2004**Field Note:**

During 2004, procedures were installed by the Genetic Services program to ensure that babies who needed a repeat specimen were tested again before they were 6 months old and too old to be screened again. This raised our percentage from 98.2% in 2003 to 99.5% in 2004.

**40. Section Number:** State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2002**Field Note:**

This indicator changed from 1998 to 1999 creating a drastic difference between these two years. Since then, MSDH has been working on the data system to ensure more accuracy in terms of reporting of tracking and treatment. There have also been discrepancies among providers in terms of what appropriate intervention involves. The overall and the data systems are still developing.

**41. Section Number:** State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data for this measure was estimated base of past reports.

**42. Section Number:** State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2002**Field Note:**

These scores were developed using a scoring sheet which is available upon request by calling Ulysses Conley at (601) 576-7688.

**43. Section Number:** State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2003**Field Note:**

These scores were developed using a scoring sheet which is available upon request by calling Ulysses Conley at (601) 576-7688.

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]  
**STATE: MS**

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	9.9	9.8	9.6	9.4	9.8
Annual Indicator	10.6	10.5	10.3	10.7	10.0
Numerator	468	443	428	453	423
Denominator	44,075	42,277	41,511	42,321	42,321
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	9.9	9.8	9.7	9.6	9.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	2.2	2.2	2	1.9	2.2
Annual Indicator	2.3	2.1	2.1	2.3	2.3
Numerator	15.1	14.7	14.4	15.3	15.3
Denominator	6.7	6.9	6.8	6.8	6.8
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2.3	2.3	2.3	2.4	2.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	6	5.9	5.8	5.7	6.2
Annual Indicator	6.6	6.6	6.8	5.8	6.1
Numerator	289	277	281	246	258
Denominator	44,075	42,277	41,511	42,321	42,321
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	6	5.9	5.8	5.8	5.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	3.9	3.8	3.2	3	3.6
Annual Indicator	4.1	3.9	3.5	4.9	3.9
Numerator	179	166	147	207	165
Denominator	44,075	42,277	41,511	42,321	42,321
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	3.9	3.9	3.8	3.8	3.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	12.1	11.6	11.1	10.7	10.8
Annual Indicator	13.0	12.1	11.9	11.3	10.8
Numerator	578	514	499	482	460
Denominator	44,422	42,563	41,805	42,607	42,607
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	10.4	10	9.7	9.3	9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	38.5	38	37.5	37	34.9
Annual Indicator	36.4	34.4	37.1	33.4	34.3
Numerator	218	206	218	197	202
Denominator	598,809	598,809	587,023	589,691	589,691
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	34.3	33.7	33.1	32.5	31.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

## FORM NOTES FOR FORM 12

Calendar year (CY) data for 2004 Outcome Measures 1-6 are currently unavailable, however, projection rates developed by the Mississippi Department of Health's Department of Health Informatics will be entered for CY 2004.

### FIELD LEVEL NOTES

1. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Provisional data based on previous year's live birth rates.
2. **Section Number:** Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Provisional data based on previous year's final data.
3. **Section Number:** Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Provisional data based on previous year data and trend analysis.
4. **Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Provisional data based on previous year data and trend analysis.
5. **Section Number:** Outcome Measure 5  
**Field Name:** OM05  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Provisional data based on previous year data and trend analysis.

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: MS**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

2

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

2

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

2

6. Family members of diverse cultures are involved in all of the above activities.

2

**Total Score:** 13

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

None

**FIELD LEVEL NOTES**

None

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

*[Sec. 505(a)(5)]*

**STATE: MS FY: 2006**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Reduce repeat teen births
2. Improve data collection capacity for Title V population
3. Explore coverage of asthma services for children
4. Increase EPSDT screening among children on Medicaid
5. Reduce the state's low birthweight rate and infant mortality rate
6. Develop plan to identify, gather data, and address issues related to maternal deaths
7. Decrease cigarette smoking among ninth through twelfth graders
8. Decrease the incidence of teen mortality and risk behaviors
9. Assure access to pediatric care for all children, including children with special health care needs
10. Decrease cigarette smoking among pregnant adolescents



**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: MS

APPLICATION YEAR: 2006

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
2.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
3.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
4.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
5.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
6.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
7.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
8.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
9.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
10.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the	No assistance is being requested	No assistance is being requested	No assistance is being requested

	measure number here: <u>    N/A    </u>			
11.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested
12.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	No assistance is being requested	No assistance is being requested	No assistance is being requested

**FORM NOTES FOR FORM 15**

No request for technical assistance is being made at this time.

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: MS**

SP # 1

**PERFORMANCE MEASURE:**

Percent of Children on Medicaid who Receive EPSDT Screening.

**STATUS:**

Active

**GOAL**

To increase access to health care for children on Medicaid.

**DEFINITION**

**Numerator:**

Number of children age 6-20 enrolled in Medicaid who have received an EPSDT screening during the past year.

**Denominator:**

Number of children 6-20 enrolled in Medicaid.

**Units:** 100   **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Data collection system to be established with the State Medicaid Agency.

**SIGNIFICANCE**

Through screening programs, health education, preventive services and community interaction, services are designed to meet the specific needs of high risk groups and to promote positive health enhancing behaviors in the community. Health education for elementary school children is taught by health educators. Programs are age/grade specific and designed to promote proper health behaviors, encourage proper nutrition, and teach hygiene. Preventive health programs are provided to children identified by the screening program as being at high risk for disease.

SP # 2

**PERFORMANCE MEASURE:**

Current Percent of Cigarette Smoking Among Ninth Through Twelfth Graders.

**STATUS:**

Active

**GOAL**

To decrease cigarette smoking among 9-12 grade students.

**DEFINITION**

**Numerator:**

The number of 9-12th grade public school students who report smoking cigarettes during the past 30 days.

**Denominator:**

The total of 9-12 grade public school students.

**Units:** 100    **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Youth Risk Behavior Survey (YRBS).

**SIGNIFICANCE**

Cigarette smoking is the single most preventable cause of death in the United States. It has been estimated that one in five deaths is caused by tobacco use. Studies have shown the vast majority of smokers start before 18 years of age.

SP # 3

**PERFORMANCE MEASURE:**

Smoking Among Pregnant Adolescents

**STATUS:**

Active

**GOAL**

To decrease cigarette smoking among pregnant adolescents

**DEFINITION**

**Numerator:**

The number of women less than 20 years old who report they smoke cigarettes during pregnancy

**Denominator:**

The total of women less than 20 who gave birth during the calendar year

**Units:** 100 **Text:** percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Data will be collected annually from birth certificate records.

**SIGNIFICANCE**

Smoking during pregnancy is associated with infant mortality, low birthweight and intrauterine growth retardation as well as negative effects in childhood. Both nationally and in Mississippi we have seen a significant increase in smoking among pregnant women aged 15-19. Not only do we want to stop the increases, we want to decrease smoking among pregnant adolescents.

SP # 4

**PERFORMANCE MEASURE:**

Percent of Children With Genetic Disorders who Receive Case Management Services.

**STATUS:**

Active

**GOAL**

To provide case management services to children testing positive for genetic disorders to assure their enrollment in a follow-up treatment program.

**DEFINITION**

**Numerator:**

The number of children with genetic disorders provided with case management services.

**Denominator:**

The number of children identified with genetic disorders.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Council of Regional Networks for Genetics Services Newborn and Clinical Annual Report, Birth Defects Registry, March of Dimes Birth Defects Foundation and MSDH Chart Reviews.

**SIGNIFICANCE**

Each year in the United States, an estimated 100,000 to 150,000 babies are born with major genetic birth defects. Children with these defects account for about 25 percent to 30 percent of pediatric hospital admissions. The total costs for care of children with defects exceed \$1 billion annually.



SP # <u>5</u>	
PERFORMANCE MEASURE:	Infants Screened and Referred for Hearing Impairment Greater Than or Equal to 35 dB nHL Will Receive Appropriate Follow-up and Intervention Upon Hospital Discharge.
STATUS:	Active
GOAL	To provide case management to all infants identified with significant hearing loss to assure they receive appropriate follow-up and intervention.
DEFINITION	<p><b>Numerator:</b> The number of infants with a significant hearing loss who are provided with case management services.</p> <p><b>Denominator:</b> The number of infants identified with significant hearing loss.</p> <p><b>Units:</b> 100    <b>Text:</b> Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	
DATA SOURCES AND DATA ISSUES	Newborn Hearing Impairment Registry
SIGNIFICANCE	Significant hearing loss impairs a child's ability to develop adequate language and communication skills.

SP # 6

**PERFORMANCE MEASURE:**

Prevalence of Infants Born with Neural Tube Defects.

**STATUS:**

Active

**GOAL**

To reduce the prevalence at birth of neural tube defects (NTDs).

**DEFINITION**

**Numerator:**

Number of infants born with neural tube defects during the reporting year.

**Denominator:**

The total number of live births during the reporting year.

**Units:** 10000 **Text:** rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Birth Certificates.

**SIGNIFICANCE**

NTDs are among the most common birth defects contributing to significant infant morbidity and mortality in the U.S. One-half to two-thirds of NTDs can be prevented by daily folic acid supplementation in reproductive-age women. Preventing NTDs is, therefore, a major opportunity that could significantly reduce mortality and morbidity of babies and children. In 1999, of the 42,678 live births in Mississippi, 20 were reported to have been born with a neural tube defect (3.0 per 10,000 live births in Mississippi).

SP # 7

PERFORMANCE MEASURE:

The Rate of Repeat Birth (per 1000) for Adolescents Less Than 18 Years Old.

STATUS:

Active

GOAL

To reduce the rate of repeat births among teenagers.

DEFINITION

**Numerator:**

Number of repeat live births to adolescents aged less than 18 years of age during the reporting period.

**Denominator:**

The number of live births to adolescents less than 18 years old during the reporting period.

**Units:** 1000    **Text:** rate

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

MSDH Vital Statistics data on mother's age and births.

SIGNIFICANCE

Mississippi continues to lead the nation in the percentage of births to adolescents. In 1998, of the 8,598 births to adolescents in the state, 2,095 (24.4%) were repeat births. Adolescent parenting is associated with the lack of high school completion and initiating a cycle of poverty for mothers.

SP # 8

**PERFORMANCE MEASURE:**

The Degree to Which the MCH Program is Developing Data Infrastructure.

**STATUS:**

Active

**GOAL**

To develop a data infrastructure with the capacity to produce appropriate, timely, and accurate MCH data.

**DEFINITION**

There are 5 data functions with specific activities relating to each function. The five functions are MCH Surveillance, Needs Assessment, Monitoring, Program Evaluation, and Epidemiologic Analysis. The score reflects how Mississippi is growing in terms of its MCH data infrastructure. For each function, scores of the questions marked with asterisks are averaged. Because each function has equal weight, the averages are summed for a total score. The grading scale is based on a percentage of the total possible score: 90-100% of 20 = 18-20 Excellent 80-89% of 20 = 16-17 Good 70-79% of 20 = 14-15 fair <69% of 20 = <14 poor

**Numerator:**

None

**Denominator:**

None

**Units:** 16 **Text:** Scale

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

MCH statewide data such as vital statistics, Block Grant performance indicators, surveillance programs, and epidemiologic projects.

**SIGNIFICANCE**

By improving the infrastructure of MCH, a stronger foundation for statewide health services is created. Mississippi's ability to assure access to policy and programmatic information is critical. The health of the MCH population is dependent on quality data and agency capacity to collect, interpret, and use these data to create appropriate intervention.

**FORM NOTES FOR FORM 16**

None

**FIELD LEVEL NOTES**

None

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: MS**

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

		<u>Annual Indicator Data</u>				
		2000	2001	2002	2003	2004
Annual Indicator	NaN		967.3	262.3	254.2	242.1
Numerator	0		9,673	2,623	2,542	2,421
Denominator	0		100,000	100,000	100,000	100,000
Is the Data Provisional or Final?					Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

		<u>Annual Indicator Data</u>				
		2000	2001	2002	2003	2004
Annual Indicator	59.6		76.0	97.0	60.9	68.6
Numerator	20,548		26,742	34,623	48,990	54,829
Denominator	34,451		35,194	35,679	80,456	79,869
Is the Data Provisional or Final?					Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

		<u>Annual Indicator Data</u>				
		2000	2001	2002	2003	2004
Annual Indicator	62.5		70.2	74.6	75.5	76.3
Numerator	10		191	554	542	546
Denominator	16		272	743	718	716
Is the Data Provisional or Final?					Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

		<u>Annual Indicator Data</u>				
		2000	2001	2002	2003	2004
Annual Indicator	80.2		83.3	83.3	86.3	84.1
Numerator	35,158		35,025	34,407	36,363	35,635
Denominator	43,821		42,055	41,284	42,136	42,372
Is the Data Provisional or Final?					Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 07**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	NaN	37.8	39.7	41.7	43.6
Numerator	0	31,683	32,808	34,409	36,421
Denominator	0	83,712	82,666	82,555	83,629
Is the Data Provisional or Final?				Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	26,204	19,601	17,330	18,366	18,784
Denominator	26,204	19,601	17,330	18,366	18,784
Is the Data Provisional or Final?				Final	Provisional

## FORM NOTES FOR FORM 17

None

### FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The MSDH is currently implementing an asthma surveillance project in which data was collected from the Jackson Metropolitan area. These data were used to estimate the prevalence of asthma in the state. The project began July 2002, and will end June 2004. The MSDH is considering the implementation of a statewide project, which will be determined by the availability of fund. Because the asthma project is new with limited data, projections are difficult to make at this time.
2. **Section Number:** Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The MSDH recently received funding from the Centers for Disease Control (CDC) and is in the process of developing a statewide asthma surveillance system, establishing collaborative partnerships, creating an asthma coalition, and developing a comprehensive State Asthma Plan.  
  
2001 indicator data were calculated per 100,000 children living in the Jackson Metropolitan Area over a period of four years. However, the 2002 data were calculated per 100,000 children living in the same area, but over a one (1) year period, which accounts for the change between the reporting periods.
3. **Section Number:** Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
an estimate for this measure was determined by using past reports.
4. **Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The percent reported for Health System Capacity Indicator # 2 in 2000 is accurate, but for 2001 data was brought forward from the previous year because we were unable to secure data.
5. **Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
2003 data were provided by the Mississippi Division of Medicaid.
6. **Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
An estimate for this measure was determine based on previously reported data.
7. **Section Number:** Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The percent reported for Health Systems Capacity Indicator # 3 is accurate but only reflects data available at the initial start of the collection of these data by the state's Medicaid program during the reporting period. As the process for the collection of their data improved, a more accurate record of those receiving service was reported.
8. **Section Number:** Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
CY 2004 data is an estimate base on previous data provided from the Mississippi Department of Medicaid.
9. **Section Number:** Health Systems Capacity Indicator #04  
**Field Name:** HSC04  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
2003 data are currently unavailable. Data will be mailed to MCHB when available.
10. **Section Number:** Health Systems Capacity Indicator #04  
**Field Name:** HSC04  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
This measure was estimated based on projections developed by the MDH's Vital Statistics Department.
11. **Section Number:** Health Systems Capacity Indicator #07  
**Field Name:** HSC07



**Row Name:**  
**Column Name:**  
**Year:** 2003

**Field Note:**  
2003 data were provided by the Division of Medicaid.

**12. Section Number:** Health Systems Capacity Indicator #07

**Field Name:** HSC07

**Row Name:**  
**Column Name:**  
**Year:** 2004

**Field Note:**  
An estimate for this measure was determine from previously reported data.

**13. Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**  
**Column Name:**  
**Year:** 2002

**Field Note:**  
This number represents the latest data available for the Social Security Administration for FY 2001.

//2004/ The CSHCN Program has maintained ongoing communication with the state Medicaid agency to expand services for children with special needs and to ensure that eligible children receive the maximum level of service available, including SCHIP participation by CSHCN. The CMP also maintains dialogue with the State Disability Determination Services unit and the Social Security Administration to help ensure a maximum level of services for all eligible children through these agencies. The CMP maintains a memorandum of understanding with the State Disability Determination Services Unit which includes exchange of eligibility information and cross referral of clients. //2004//

**14. Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**  
**Column Name:**  
**Year:** 2003

**Field Note:**  
These data are provided by SSI indicating the number of SSI beneficiaries less than 16 years old in the state. The Children's Medical Program (CMP) staff maintains an ongoing relationship with the Social Security Administration and the State Disability Determination Services to facilitate the referral process to CMP for children and families potentially eligible for the program. The CMP collaborates with Medicaid, Social Security Administration and other third party payors to ensure access to needed services for children with special health care needs.

Each SSI beneficiary is made aware of CMP, eligibility criteria, and covered services. All beneficiaries are encouraged to apply for CMP services. However, all SSI beneficiaries may not directly receive rehabilitative services through the CSHCN program due to differences in eligibility criteria for program enrollment. Some degree of case management/care coordination is offered to all SSI beneficiaries.

**15. Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**  
**Column Name:**  
**Year:** 2004

**Field Note:**  
These data are provided by SSI indicating the number of SSI beneficiaries less than 16 years old in the state. The Children's Medical Program (CMP) staff maintains an ongoing relationship with the Social Security Administration and the State Disability Determination Services to facilitate the referral process to CMP for children and families potentially eligible for the program. The CMP collaborates with Medicaid, Social Security Administration and other third party payors to ensure access to needed services for children with special health care needs.

Each SSI beneficiary is made aware of CMP, eligibility criteria, and covered services. All beneficiaries are encouraged to apply for CMP services. However, all SSI beneficiaries may not directly receive rehabilitative services through the CSHCN program due to differences in eligibility criteria for program enrollment. Some degree of case management/care coordination is offered to all SSI beneficiaries.

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #05**  
**(MEDICAID AND NON-MEDICAID COMPARISON)**  
**STATE: MS**

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2004	Payment source from birth certificate	<u>65</u>	<u>35</u>	<u>11.5</u>
b) Infant deaths per 1,000 live births	2004	Payment source from birth certificate	<u>63</u>	<u>37</u>	<u>10.7</u>
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2004	Payment source from birth certificate	<u>49</u>	<u>51</u>	<u>85.1</u>
d) Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2004	Payment source from birth certificate	<u>51</u>	<u>49</u>	<u>84.1</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06 (MEDICAID ELIGIBILITY LEVEL)**  
**STATE: MS**

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2004	<u>185</u>
b) Medicaid Children (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>19</u> ) (Age range <u>      </u> to <u>      </u> )	2004	<u>133</u> <u>100</u> <u>      </u>
c) Pregnant Women	2004	<u>185</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06 (SCHIP ELIGIBILITY LEVEL)**  
**STATE: MS**

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2004	<u>200</u>
b) Medicaid Children (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>19</u> ) (Age range <u>      </u> to <u>      </u> )	2004	<u>200</u> <u>200</u> <u>      </u>
c) Pregnant Women	2004	<u>200</u>

**FORM NOTES FOR FORM 18**

These data were estimated based on projections developed by MDH's Department of Health Informatics

**FIELD LEVEL NOTES**

None

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: MS**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

<b>DATABASES OR SURVEYS</b>	<b>Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *</b>	<b>Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)</b>
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	2	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	1	No
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	3	Yes
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	1	No
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

\*Where:  
1 = No, the MCH agency does not have this ability.  
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.  
3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: MS**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other:		

**HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity**  
*(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)*

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Pediatric Nutrition Surveillance System (PedNSS)	2	Yes
WIC Program Data	3	Yes
Other:		

\*Where:  
1 = No  
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.  
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

**Notes:**

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

**FORM NOTES FOR FORM 19**

None

**FIELD LEVEL NOTES**

None

**FORM 20**  
**HEALTH STATUS INDICATORS #01-#05**  
**MULTI-YEAR DATA**  
**STATE: MS**

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	10.7	NaN	NaN	11.5	11.4
Numerator	4,701	0	0	4,858	4,740
Denominator	44,075	0	0	42,321	41,488
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	8.9	NaN	NaN	9.5	9.3
Numerator	3,797	0	0	3,895	3,795
Denominator	42,681	0	0	40,921	40,823
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	2.2	NaN	NaN	2.3	2.3
Numerator	971	0	0	963	954
Denominator	44,075	0	0	42,321	41,488
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.8	NaN	NaN	1.8	1.8
Numerator	759	0	0	759	749
Denominator	42,681	0	0	42,321	40,823
Is the Data Provisional or Final?				Provisional	Provisional

**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	20.0	NaN	11,808.1	7,796.6	6,194.7
Numerator	128	0	32	23	21
Denominator	640,026	0	271	295	339
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	9.1	NaN	12,087.9	7,489.0	6,923.1
Numerator	58	0	22	17	18
Denominator	640,026	0	182	227	260
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	50.7	NaN	NaN	43.5	44.3
Numerator	226	0	0	196	200
Denominator	446,135	0	0	450,670	451,401
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	12,860.1	NaN	14,995.0	15,351.3	17,229.3
Numerator	558	0	1,196	1,488	2,414
Denominator	4,339	0	7,976	9,693	14,011
Is the Data Provisional or Final?				Final	Final



**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	8,772.7	NaN	12,148.0	12,422.7	12,943.1
Numerator	213	0	509	683	1,048
Denominator	2,428	0	4,190	5,498	8,097
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 04C**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	28,789.1	NaN	31,002.4	31,193.2	31,419.0
Numerator	699	0	1,299	1,715	2,544
Denominator	2,428	0	4,190	5,498	8,097
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	36.3	NaN	NaN	35.4	49.9
Numerator	4,150	0	0	4,202	5,919
Denominator	114,460	0	0	118,728	118,728
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	12.3	NaN	NaN	7.6	16.7
Numerator	5,294	0	0	3,981	8,669
Denominator	430,422	0	0	520,422	520,422
Is the Data Provisional or Final?				Final	Final

## FORM NOTES FOR FORM 20

None

### FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #01B  
**Field Name:** HSI01B  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
This measure was estimated based on projections developed by the MDH's Vital Statistics Department.
2. **Section Number:** Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
This measure was estimated based on projections developed by the MDH's Vital Statistics Department.
3. **Section Number:** Health Status Indicator #02B  
**Field Name:** HSI02B  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
This measure was estimated based on projections developed by the MDH's Vital Statistics Department.
4. **Section Number:** Health Status Indicator #02B  
**Field Name:** HSI02B  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
This measure was estimated based on projections developed by the MDH's Vital Statistics Department.
5. **Section Number:** Health Status Indicator #03C  
**Field Name:** HSI03C  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
This measure was estimated based on projections developed by the MDH's Vital Statistics Department.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: MS**

**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	43,412	22,341	19,902	238	342	7	582	0
Children 1 through 4	167,138	87,683	75,236	906	1,195	36	2,082	0
Children 5 through 9	203,507	106,562	92,298	1,006	1,528	52	2,061	0
Children 10 through 14	219,046	114,458	100,181	1,213	1,487	66	1,641	0
Children 15 through 19	216,778	115,545	96,947	1,202	1,534	64	1,486	0
Children 20 through 24	233,892	126,979	102,120	1,122	2,118	94	1,459	0
Children 0 through 24	1,083,773	573,568	486,684	5,687	8,204	319	9,311	0

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	42,697	715	0
Children 1 through 4	164,085	3,053	0
Children 5 through 9	199,927	3,580	0
Children 10 through 14	215,786	3,260	0
Children 15 through 19	213,560	3,218	0
Children 20 through 24	228,991	4,901	0
Children 0 through 24	1,065,046	18,727	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: MS**

**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	154	26	128	0	0	0	0	0
Women 15 through 17	2,217	802	1,394	18	3	0	0	0
Women 18 through 19	4,398	1,924	2,415	44	14	1	0	0
Women 20 through 34	32,394	18,404	13,446	205	305	34	0	0
Women 35 or older	3,158	1,969	1,085	19	68	17	0	0
Women of all ages	42,321	23,125	18,468	286	390	52	0	0

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	150	1	3
Women 15 through 17	2,131	37	49
Women 18 through 19	4,237	87	74
Women 20 through 34	29,782	715	1,890
Women 35 or older	2,828	69	261
Women of all ages	39,128	909	2,277

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: MS**

**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	453	158	283	7	3	1	0	1
Children 1 through 4	88	38	50	0	0	0	0	0
Children 5 through 9	44	22	22	0	0	0	0	0
Children 10 through 14	65	35	29	1	0	0	0	0
Children 15 through 19	192	114	68	3	7	0	0	0
Children 20 through 24	287	146	137	2	2	0	0	0
Children 0 through 24	1,129	513	589	13	12	1	0	1

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	390	3	60
Children 1 through 4	74	1	13
Children 5 through 9	42	0	2
Children 10 through 14	57	0	8
Children 15 through 19	169	1	22
Children 20 through 24	246	6	35
Children 0 through 24	978	11	140

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: MS**

**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	859,851	446,082.0	395,548.0	4,546.0	5,917.0	228.0	7,530.0	0	2004
Percent in household headed by single parent	100.0	61.3	36.5	0.3	0.7	0	0.7	0.5	2004
Percent in TANF (Grant) families	100.0	22.6	76.9	0.3	0.2	0.7	0	0	2004
Number enrolled in Medicaid	424,474	137,990.0	253,670.0	1,712.0	1,801.0	0	0	29,301.0	2004
Number enrolled in SCHIP	67,015	15,118.0	51,555.0	188.0	107.0	47.0	0	0	2004
Number living in foster home care	2,686	1,141.0	1,418.0	2.0	6.0	21.0	98.0	0	2004
Number enrolled in food stamp program	209,972	47,379.0	161,540.0	594.0	333.0	126.0	0	0	2004
Number enrolled in WIC	95,114	35,920.0	58,803.0	51.0	340.0	0	0	0	2004
Rate (per 100,000) of juvenile crime arrests	2,306.4	1,565.6	3,170.0	110.0	2,568.9	0	0	0	2004
Percentage of high school drop-outs (grade 9 through 12)	4.6	4.2	5.7	6.0	2.3	0	0	0	2004

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	842,653.0	17,197.0	0	2004
Percent in household headed by single parent	50.0	50.0	0	2004
Percent in TANF (Grant) families	99.5	0.5	0	2004
Number enrolled in Medicaid	421,533.0	2,941.0	0	2004
Number enrolled in SCHIP	66,707.0	308.0	0	2004
Number living in foster home care	2,506.0	25.0	138.0	2004
Number enrolled in food stamp program	208,898.0	1,074.0	0	2004
Number enrolled in WIC	95,115.0	3,089.0	0	2004
Rate (per 100,000) of juvenile crime arrests	2,335.5	883.9	0	2004
Percentage of high school drop-outs (grade 9 through 12)	4.6	6.6	0	2004

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: MS**

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	297,920
Living in urban areas	187,690
Living in rural areas	319,580
Living in frontier areas	0
<b>Total - all children 0 through 19</b>	<b>507,270</b>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: MS**

**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	2,915,696.0
Percent Below: 50% of poverty	6.0
100% of poverty	16.0
200% of poverty	39.7

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: MS**

**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	859,850.0
Percent Below: 50% of poverty	9.0
100% of poverty	22.0
200% of poverty	49.0

## FORM NOTES FOR FORM 21

None

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 10  
**Field Name:** Metropolitan  
**Row Name:** Living in metropolitan areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This number represent an estimate based on the population determined for children 0 through 19 living in metro areas.
2. **Section Number:** Indicator 10  
**Field Name:** Urban  
**Row Name:** Living in urban areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This number represent an estimate based on the population determined for children 0 through 19 living in urban areas.
3. **Section Number:** Indicator 10  
**Field Name:** Rural  
**Row Name:** Living in rural areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This number represent an estimate based on the population determined for children 0 through 19 living in rural areas.
4. **Section Number:** Indicator 10  
**Field Name:** Frontier  
**Row Name:** Living in frontier areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
There are known frontier areas in Mississippi
5. **Section Number:** Indicator 11  
**Field Name:** S11\_total  
**Row Name:** Total Population  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
2003 poverty status by state (POV46) is weighted data for Mississippi's population size (2,851,000 residents).
6. **Section Number:** Indicator 11  
**Field Name:** S11\_50percent  
**Row Name:** Percent Below: 50% of poverty  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This percentage was estimated using 2004 data for the south region.
7. **Section Number:** Indicator 12  
**Field Name:** S12\_50percent  
**Row Name:** Percent Below: 50% of poverty  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This percentage was estimated using 2004 data for the south region.



**NEW STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: MS**

SP # 1

**PERFORMANCE MEASURE:**

Percent of children on Medicaid and SCHIP who receive EPSDT and preventive health services well child visits.

**GOAL**

To increase access to preventive health care and health care for children on Medicaid and SCHIP.

**DEFINITION**

**Numerator:**

Number of children age 0-20 enrolled in Medicaid and SCHIP who received a preventive screening during the past year.

**Denominator:**

Number of children 0-20 enrolled in Medicaid and SCHIP.

**Units:** 100    **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Statewide Data collection system on Medicaid and SCHIP

**SIGNIFICANCE**

Through screening programs, health education, preventive services and community interaction, services are designed to meet the specific needs of high risk groups and to promote positive health enhancing behaviors in the community. Health education for elementary school children is taught by health educators. Programs are age/grade specific and designed to promote proper health behaviors, encourage proper nutrition, and teach hygiene. Preventive health programs are provided to children identified by the screening program as being at high risk for disease.

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 2

**PERFORMANCE MEASURE:**

Current percent of cigarette smoking among adolescents grades 6-12.

**GOAL**

To decrease cigarette smoking among 6-12 grade students

**DEFINITION**

**Numerator:**

The number of 6-12th grade public school students who report smoking cigarettes during the past 30 days

**Denominator:**

The total of 6-12 grade public school students who report smiking cigarettes during the reporting period

**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Youth Risk Behavior Survey (YRBS) and the Youth Tobacco Survey (YTS)

**SIGNIFICANCE**

Cigarette smoking is the single most preventable cause of death in the United States. It has been estimated that one in five dealths is caused by tobacco use. Studies have shown the vast majority of smokers start before 18 years of age.

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 3

**PERFORMANCE MEASURE:**

Percent of pregnant women who smoke

**GOAL**

To decrease cigarette smoking among pregnant women

**DEFINITION**

**Numerator:**

The number of women who report smoking while pregnant during the calendar year

**Denominator:**

The total of women who gave birth during the calendar year

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Data will be collected annually from Behavior Risk Factor Surveillance System (BRFSS) data and birth certificate records

**SIGNIFICANCE**

Smoking during pregnancy is associated with infant mortality, low birthweight and intrauterine growth retardation as well as negative effects in childhood. Both nationally and in Mississippi we have seen a significant increase in smoking among pregnant women aged 15-19. Not only do we want to stop the increases, we want to decrease smoking among pregnant women.

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 4

**PERFORMANCE MEASURE:**

Percent of children with genetic disorders identified through MDH newborn screening who receive case management services.

**GOAL**

To provide case management services to children testing positive for genetic disorders to assure their enrollment in a follow-up treatment program.

**DEFINITION**

**Numerator:**

The number of children with genetic disorders provided with case management services.

**Denominator:**

The number of children identified with genetic disorders.

**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Council of Regional Networks for Genetics Services Newborn and Clinical Annual Report, Birth Defects Registry, March of Dimes Birth Defects Foundation and MSDH Chart Reviews.

**SIGNIFICANCE**

Each year in the United States, an estimated 100,000 to 150,000 babies are born with major genetic birth defects. Children with these defects account for about 25 percent to 30 percent of pediatric hospital admissions. The total costs for care of children with defects exceed \$1 billion annually.

**OBJECTIVE**

2006	2007	2008	2009	2010
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SP # 5

**PERFORMANCE MEASURE:**

The Rate of Repeat Birth (per 1000) for Adolescents Less Than 18 Years Old

**GOAL**

To reduce the rate of repeat births among teenagers during the reporting period

**DEFINITION**

**Numerator:**

Number of repeat live births to adolescents aged less than 18 years of age during the reporting period.

**Denominator:**

The number of live births to adolescents less than 18 years old during the reporting period.

**Units:** 1000 **Text:** 2

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

MSDH Vital Statistics data on mother's age and births.

**SIGNIFICANCE**

Mississippi continues to lead the nation in the percentage of births to adolescents. In 1998, of the 8,598 births to adolescents in the state, 2,095 (24.4%) were repeat births. Adolescent parenting is associated with the lack of high school completion and initiating a cycle of poverty for mothers.

**OBJECTIVE**

2006	2007	2008	2009	2010
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SP # 6

**PERFORMANCE MEASURE:**

Percent of children ages 0-5 on WIC classified as overweight

**GOAL**

To reduce the rate of children on WIC who are classified as overweight

**DEFINITION**

**Numerator:**

The number of children age 0-5 on WIC classified as overweight

**Denominator:**

The number of children age 0-5 on WIC

**Units:** 100 **Text:** 1

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

WIC patient management system

**SIGNIFICANCE**

Mississippi is ranked as one of the most obese states in the United States. According to 2003 YRBSS data, over 16% of youth report themselves as being overweight and another 17% are at risk for becoming overweight. Physical education at an all time low with limited funding available to address obesity issues in our state. Consequently, childhood obesity must be addressed as a public health problem through comprehensive multi-agency efforts to eradicate this growing public health concern.

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 7

**PERFORMANCE MEASURE:**

Percent of adolescents in grades 6-12 who are overweight or at risk for becoming overweight

**GOAL**

To reduce the rate of teens who are overweight or at risk for becoming overweight

**DEFINITION**

**Numerator:**

The number of 6-12 grade public school students who report being overweight or at risk for becoming overweight

**Denominator:**

The number of 6-12 grade public school students surveyed during reporting period

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

YRBS data

**SIGNIFICANCE**

Mississippi is ranked as one of the most obese states in the United States. According to 2003 YRBSS data, over 16% of youth report themselves as being overweight and another 17% are at risk for becoming overweight. Physical education at an all time low with limited funding available to address obesity issues in our state. Consequently, childhood obesity must be addressed as a public health problem through comprehensive multi-agency efforts to eradicate this growing public health concern.

**OBJECTIVE**

2006	2007	2008	2009	2010
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SP # 8

**PERFORMANCE MEASURE:**

Percent of children entering kindergarten reported to have had a comprehensive dental exam within the past 12 months

**GOAL**

To increase the percent of children entering kindergarten who receive oral health care and preventive services

**DEFINITION**

**Numerator:**

The number of children entering kindergarten reported to have had a dental exam within the past 12 months

**Denominator:**

The number of children entering kindergarten

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Student health records

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
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